Rev.08/2016	Small Business Loan Act of 2007							
	Personal Financial Statement CONFIDENTIAL							
Personal Financial Statemen			Complete a separate PFS statement for each person owning part of the business.  Persons who are not owners should not sign this statement.  This form is designed and requested by the Commerce Department to assist in the Loan Application review process.					
Return To:			Read all direc	ctions before completing F	inancial Statement.			
Little River Band of Ottawa Indians Attn: Commerce Department 2608 Government Center Drive Manistee, MI 49660			☐ Individual  Apply your own income and assets and not the income and assets of another person and complete the Financial Statement below only as it applies to you, individually. Sign and date the Financial Statement.					
			☐ Partner A form for each the application	ch party will be submitted on	with			
Name:								
Home Addre	ess:			Social Security #:				
Home Phone	e:			LRBOI Enrollment #:				
Assets		Even Dollars	Liabilities an	d Net Worth	Even Dollars			
Cash on har See Schedu	nd and in Banks— le A	\$	Notes Payable Schedule A	e:Bank—See	\$			
Real Estate Schedule C	Owned—See		Notes Payable: Other Institutions— See Schedule A					
Mortgages and Land Contracts Receivable—			Notes Payable—Relatives& Others					
Cash Value Life Insurance—See Schedule E			Real Estate Mortgages Payable—See Schedule C or D					
Other Assets Itemize			Accounts and	Bills Due				
			Unpaid Taxes	3				
TOTAL AS	SETS	\$	TOTAL LIAB	HILTIES	\$			

Sources of Income	Even Dollars	General Information				
Salary	\$	Employer				
Bonus and Commissions		Position or Profession No. Years				
Dividends		Employer's Address				
Real Estate Income			Phone No.			
Other Income: Itemize		Partner, officer or owner in any other venture? No Yes				
Are any assets pledged? Yes No		If so, explain:				
Detail in Schedule A						
TOTAL	\$					
Contingent Liabilities Dollars	In Even	Are you now or were a defendar action? No Yes	nt in any suits or legal			
		If so, explain:				
		Income taxes settled through (I	Oate)			

I have carefully read and completed the foregoing information as requested by the Little River Band Department of Commerce. The information presented is as true and accurate a statement of my financial condition on the date indicated. Completion of this statement is requested for the purpose of obtaining and maintaining a Loan under the Small Business Loan Act of 2007 Ordinance. I agree that if any material change(s) occur(s) in my financial condition that I will immediately notify Department of Commerce of change(s).

I fully understand that I am fully obligated to repay the entire loan. The above mentioned information is accurate and truthful to the best of my knowledge.

Applicant Signature	Tribal ID	Date of Birth	Date Signed	

Schedule A: Banks, Brokers, Savings & Loan Association, Finance Companies or Credit Unions. List here the names of all the institutions at which you maintain a deposit account and/or where you have obtained loans.

Name of Institution	Name on Account	Balance on Deposit	High Credit	Amount Owing	Monthly Payment	Secured by What Assets
	TOTAL		TOTAL			

## Schedule B: Partnership Interests (General & Ltd.)

Number of	Indicate:			F	Pledged
	1. Name of Company or Agency issuing security	InName	Market	Yes	No
	2. Typeofinvestmentorequity classification	of:	Value*	()	()
(Bonds), or	3. Number of shares, bonds or % of ownership held				
% of	4. Basis of valuation*				
Ownership					
<u> </u>		TOTAL		<u> </u>	

<sup>\*</sup>If unlisted security or partnership interest, provide current financial statements to support basis for valuation.

Schedule C: Real Estate Owned (and related debt, if applicable)

		•	, 11	•			
Description of	Titlein	Date	Cost+	Present	Mortgage or Land Contract Payabl		
Property or	Name Of	Acquired	Improvement	Mkt.	Bal. Owing	Mo.	Holder
Address			s	Value		Payt.	
	•	TOTAL					

## 

Description of	Titlein	Date	Balance	Monthly	Mortgage or Land Contract Payabl		
Property or	Name Of	Acquired	Receivable	Payment	Bal. Owing	Mo.	Holder
Address		_				Payt.	
	TOTAL						

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